Colorado Home- and Community-Based Services Heightened Scrutiny Evaluation

Non-residential Setting Summary Sheet

Heightened Scrutiny Identification Number	HS-021
Provider Name	Eastern Colorado Services for the Developmentally Disabled Inc
Setting Name	
Setting Address	WITHHELD
Compliant as of Date	Expected to submit remaining evidence of compliance this summer, to be verified by 12/31/21.
Date of This Evaluation	5/03/21

Setting Type

 □ Adult Day Services (Not IDD Specific) Basic □ Adult Day Services (Not IDD Specific) Brain Injury Waiver □ Adult Day Services (Not IDD Specific) Specialized □ Day Habilitation for Individuals with IDD Prevocational Services ☑ Day Habilitation for Individuals with IDD Specialized Habilitation ☑ Day Habilitation for Individuals with IDD Supported Community Connections (SCC)
□ Supported Employment Group Supported Employment
Waivers Served
 □ Children's Extensive Support (CES) □ Community Mental Health Supports (CMHS) for Persons with Major Mental Illness ☑ Elderly, Blind, and Disabled (EBD) □ Persons with Brain Injury (BI) ☑ Persons with Developmental Disabilities (DD) □ Persons with Spinal Cord Injury (SCI) ☑ Supported Living Services (SLS)
Reason(s) for Heightened Scrutiny
□ Located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment (such as a hospital, nursing facility, ICF/IID, or IMD); □ Located in a building on the grounds of, or adjacent to, a public institution; or ⊠ Has the effect of isolating individuals receiving Medicaid home- and community-based services (HCBS) from the broader community of individuals not receiving Medicaid HCBS

Setting Description

This setting serves about 45 individuals on the HCBS waiver. This is a large, warehouse-sized building, set in an industrial area of Sterling, CO. While some community-based activities are offered, group capacity is limited and numerous individuals frequently "stay back" for segregated activities.

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Compliance Summary

Compliant?	Federal Requirement	Summary of Evidence of Compliance
□ Yes □ Partial ☑ No	The setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS. 42 CFR 441.304(c)(4)(i)	The setting offers some community-based activities, but not all individuals have the opportunity to participate in these activities. This setting was originally a sheltered workshop. When paid workshop opportunities ceased, individuals remained in the building with leisure activities instead. Many of the leisure activities are not age-appropriate or engaging, such as watching cartoons or playing Lite Brite. Most individuals and staff still refer to the setting as "workshop." According to documentation, of the 22 individuals who responded to a survey, many indicated a desire for employment or were underemployed. Fifty-nine percent (59% or 13 of the 22) noted dissatisfaction with their schedules, work hours, community access, activities, and/or employment status. The provider recently submitted plans to increase integration and expand activities. State staff will verify the plans have been implemented on a future site visit.
⊠ Yes □ Partial □ No	The settings is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and for residential settings, resources available for room and board. 42 CFR § 441.301(c)(4)(ii)	The setting is compliant with this requirement, as it relates to being a non-residential setting.
☐ Yes ☐ Partial ⊠ No	The setting ensures an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint. 42 CFR § 441.301(c)(4)(iii)	This setting does not yet meet this requirement. Although the provider's policies on restraint include the correct process for first obtaining informed consent, the setting does not consistently ensure dignity and respect,



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		particularly through the lack of age-appropriate activities for adults. The agency recently submitted a plan to train staff on age appropriateness. During the site visit, state staff observed that individuals did not have a secure place to store their belongings. The provider has since installed lockers, where individuals can keep their personal belongings. Staff have completed Person Centered Training (PCT) training.
□ Yes ⊠ Partial □ No	The setting optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact. 42 CFR § 441.301(c)(4)(iv)	Because individuals do not control their schedules, and have been isolated from the greater community, the setting does not meet this requirement. The provider recently submitted plans to increase integration and expand activities. The plans include training direct care staff in these areas. The provider indicated proof of training will be submitted. State staff will verify the plans have been implemented on a future site visit.
☐ Yes ⊠ Partial ☐ No	The setting facilitates individual choice regarding services and supports, and who provides them. 42 CFR § 441.301(c)(4)(v)	While individuals do have a choice of providers, the setting does not offer adequate program activity or options to appeal to a large group of adults. The provider's plans to increase integration and expand activities have been received. Verification the plans have been implemented will be determined on a future site visit.
☐ Yes ☐ Partial ☐ No ☑ Not Applicable	The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at minimum, the same responsibilities and protections from eviction that tenants have under the landlord-tenant law of the State, county, city or other designated entity. For settings	This a nonresidential site, so this requirement does not apply.



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	where landlord-tenant laws do not apply, a lease, residency agreement, or other form of written agreement is in place for each HCBS participant providing protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord-tenant law. 42 CFR § 441.301(c)(4)(vi)(A)	
⊠ Yes □ Partial □ No	Each individual has privacy in their sleeping or living unit: (1) Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors. (2) Individuals sharing units have a choice of roommates in that setting. (3) Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement. 42 CFR § 441.301(c)(4)(vi)(B)	This a nonresidential site, so this requirement does not apply. Individuals do have a secure place to store their belongings, and the bathroom doors lock for privacy.
□ Yes □ Partial ⊠ No	Individuals have the freedom and support to control their schedules and activities and have access to food any time. 42 CFR § 441.301(c)(4)(vi)(C)	Individuals do not control their schedules to the degree they desire. The majority of individuals expressed they would prefer to engage in community-based activities, employment, or other activities not currently offered. During the site visit in 2017, state staff observed several activities not age-appropriate for adults, such as watching cartoons, coloring on pre-school coloring books, and puzzles designed for children. State staff advised the provider on age-appropriateness and activity expansion, including opportunities to be active in the broader community. In 2020, the provider submitted new documentation of sample activities. The sample included many activities that were still not age appropriate, nor had any





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		identifiable function. For example, wandering, watching staff, and stacking/unstacking chairs were activity options submitted. State staff further advised the provider of the need to train staff and improve in this area. The provider recently submitted plans to increase integration and expand activities. The plans include training direct care staff in these areas. The provider indicated proof of training will be submitted. State staff will verify the plans have been implemented on a future site visit.
⊠ Yes □ Partial □ No	Individuals are able to have visitors of their choosing at any time. 42 CFR § 441.301(c)(4)(vi)(D)	Yes, individuals can have visitors of their choice when they wish at this setting.
⊠ Yes □ Partial □ No	The setting is physically accessible to the individual. 42 CFR § 441.301(c)(4)(vi)(E)	The setting is physically accessible.
☐ Yes ⊠ Partial ☐ No	Any rights modifications are supported by a specific assessed need and justified in the person-centered service plan. The following criteria are documented in the person-centered service plan: (1) A specific and individualized assessed need. (2) The positive interventions and supports used prior to any rights modifications. (3) The less intrusive methods of meeting the need that were tried but did not work. (4) A clear description of the rights modification that is directly proportionate to the specific assessed need. (5) A plan for the regular collection and review of data to measure the ongoing	The provider revised its policy for rights and right modifications to correctly reflect all required steps. However, the correct process of modifying a right has not yet been demonstrated. State staff provided additional guidance in this area, including emails and webinar trainings. A state approved informed consent template with guidance has been provided. The provider will upload documentation the process was completed, and state staff will verify that rights modifications are completed correctly.



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effectiveness of the modification. (6) Established time limits for periodic reviews to determine whether the modification is still necessary or can be terminated.	
(7) The informed consent of	
the individual.	
(8) An assurance that	
interventions and supports	
will cause no harm to the	

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Setting Summary Sheet

Summary of Findings from Desk Review and/or Site Visit(s)

The state reviewed the Provider Transition Plan (PTP) and supporting materials submitted by the provider for this setting. Through an iterative process, the state worked with the provider to ensure that the PTP accurately identified all compliance issues. State staff conducted a site visit in 2017. During the site visit, state staff observed the setting and its operations, spoke with provider staff, and interviewed individuals outside the presence of provider staff to learn about their experience at the setting. State staff also reviewed the provider's policies and procedures and other documents (listed below).

State staff observed that the setting did not consistently reflect a program for adults. Many activities offered were designed for children. There were minimal opportunities for community integration, and the opportunities that were offered were limited. The program was generally segregated from the broader community. After the site visit, state staff provided guidance on how to remediate this setting through multiple contacts via email, phone calls, the comment boxes within the PTP platform, and webinars/trainings.

The state reviewed the following materials submitted by the provider:

- Rights of Persons Handout
- Grievance/Complaint Policy
- Medication Policy
- Mistreatment Policy
- Physical Intervention Policy
- Incident Reporting Policy
- Dispute Resolution Policy
- Recent Month Calendar of Community Activities

If the provider updated any of these materials, the findings in this evaluation reflect the most recent version of each item.

Summary of individual interviews:

Numerous individuals reported they wanted employment or were underemployed. A high number of individuals expressed dissatisfaction with activities and integration.

Summary of Stakeholder and Public Input; Department Responses

The Individuals, Families and Advocates (IFA) survey results were reviewed.22 Individual Family Surveys were submitted regarding services at this setting. 59% (13 surveys) expressed dissatisfaction with schedules, work hours, activities, community access, and/or employment status.

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Remediation Plan (If Not Already Implemented) & State Oversight to Verify Implementation

The site must complete these steps to overcome heightened scrutiny:

- Develop programs to increase opportunities for community integration.
- Reduce individual-to-staff ratios and/or adjust staff responsibilities to improve community integration.
- Increase support for individuals to leave the setting and engage with the greater community.
- Ensure that age-appropriate activities are available to individuals and that information about similar activities in the greater community is provided to individuals.
- Review and modify current staff trainings on community integration.
- Create tools and messaging materials to educate individuals and families on community integration—including employment options.
- Offer training for individuals on community integration and how to access the greater community.

Additional Comments

In addition to the documents submitted by the provider listed in the section above, the following were also uploaded to the site:

- Activity logs
- Person-centered training logs and handout
- Information about lockers

Concerning activities, the provider stated that no later than 5/2/21, staff will be trained in expanding activity offerings, and an activity board will be offered with magnets and color-coded charms to help individuals identify in which activities/events they'd like to participate.

Pending recent efforts to improve the setting, state staff will conduct another site visit to assess whether the cited issues were resolved.